

State of New Mexico - Taxation and Revenue Department

**TECHNOLOGY JOBS TAX CREDIT CLAIM FORM**

Requesting application of approved Technology Jobs Tax Credit to the attached form.

**INSTRUCTIONS FOR USING THIS FORM:** When claiming an approved Technology Jobs Tax Credit, this form must accompany the CRS-1, PIT-1, PTE-CR or CIT-CR forms for the return to which the taxpayer wishes to apply the credit. Complete the Technology Jobs Tax Credit Claim Form and mail to the address below along with the return and any applicable payments.

The holder is the business to whom the credit has been approved.

The Basic Tax Credit - may be applied against the taxpayer's compensating tax, gross receipts tax, or withholding tax due to the State of New Mexico. No taxpayer may claim an amount of approved basic credit for any reporting period that exceeds the sum of the taxpayer's gross receipts, compensating tax, and withholding tax due for that reporting period.

The Additional Tax Credit - may be applied against the taxpayer's income tax or corporate income tax. No taxpayer may claim an amount of additional credit for any reporting period that exceeds the amount of the taxpayer's income tax or corporate income tax due for that reporting period. A husband and wife may each claim only one-half the additional credit.

Any amount of credit not claimed for a reporting period may be claimed in subsequent reporting periods.

Mail to: Taxation and Revenue Department, ATTN: ARSB - CRS, P.O. Box 25128, Santa Fe, NM 87504-25128. For assistance call: 505-476-3683.

Name of Holder \_\_\_\_\_ Approval Number T J-

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**Taxpayer Identification Number of Holder**

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Enter the Taxpayer Identification Number of the taxpayer claiming the credit, if different than the holder \_\_\_\_\_

**Report Period\***

				to				
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**Beginning (mm-yy)      Ending (mm-yy)**

\*Enter same report period as entered on your attached tax form.

**Amount of Technology Jobs Tax Credit  
to be applied**

\$ 

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**Check One**

- ☐ **CRS-1 Form**
- ☐ **PIT-1 Form**
- ☐ **PTE-CR Form**
- ☐ **CIT-CR Form**

\_\_\_\_\_  
Signature of Taxpayer of Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number

**Attach to applicable New Mexico Tax Form**